



## Application for Renewal of Georgia Commercial Driver's License

### PART 1 Highway Watch

Effective July 1, 2006, in accordance with O.C.G.A. §40-5-150(h), applicants applying for renewal of their Georgia Commercial Driver's License must provide evidence that they have completed the Highway Watch safety and security training program or its federally designated successor program and is properly registered with the same. ***Please come prepared to display to the Examiner your Highway Watch card or printed receipt from the Georgia Motor Trucking Association indicating your Highway Watch number.***

### PART 2 Citizenship/Lawful Presence

Are you a U.S. citizen? <input type="checkbox"/> YES <input type="checkbox"/> NO	<i>Acceptable proof of lawful presence may be required, in accordance with O.C.G.A. §40-5-21.1.</i>
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### PART 3 Applicant Data

Please indicate your answer to the following questions by placing a check mark in the appropriate box.

☐ YES    ☐ NO    1. Are you a Georgia Resident?

☐ YES    ☐ NO    2. Do you hold a driver's license other than one issued by Georgia?

If "YES", please list here the name of the issuing state: \_\_\_\_\_

☐ YES    ☐ NO    3. Is your privilege to drive currently disqualified, suspended, revoked, cancelled or denied in this or any other state?

If "YES", please list here the name of state(s): \_\_\_\_\_

4. Please list the names of all states in which you have held a commercial or non-commercial driver's license during the past ten (10) years.

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5. Please provide the following information about yourself and, if issued, your current driver's license number:

Full Name (Last, First, Middle)					Social Security Number			
Driver's License Number	Issue Date	Expiration Date	Date of Birth	Height	Weight	Hair Color	Eye Color	Sex
Mailing Address			Apartment Number		City		State	Zip Code
Residence Address			Apartment Number		City		State	Zip Code

### PART 4 Medical Certification

**MEDICAL QUALIFICATIONS:** Unless specifically exempted, you must possess a valid medical examiner's certificate in order to operate a commercial motor vehicle (49 CFR §391.41.). As defined in 49 CFR §390.5, the term 'medical examiner' means a person who is licensed, certified, and/or registered, in accordance with applicable State laws and regulations, to perform physical examinations. The term includes but is not limited to, doctors of medicine, doctors of osteopathy, physician assistants, advanced practice nurses, and doctors of chiropractic.

**SPECIAL NOTICE:** At all times while operating a commercial motor vehicle, you must carry on your person proof of compliance with this requirement. Government employees (e.g. federal, state, county, or city employees) while operating government owned vehicles are exempt from this medical requirement.

Please initial below the statement which defines your compliance with **PART 4 Medical Certification**:

I satisfy the medical qualification requirement as defined in 49 CFR §391, et seq. (initials) \_\_\_\_\_.

I am exempt from the medical qualification defined in 49 CFR §391, et seq. (initials) \_\_\_\_\_.

#### **PART 5 Application Data**

If you intend to operate vehicles equipped with air brakes, you must qualify for an "air brakes" certification (check one).

☐ YES ☐ NO **Do you intend to operate vehicles equipped with air brakes?**

Please indicate any endorsements you wish to ADD to your renewed Georgia Commercial Driver's License (You will be required to take and successfully pass all necessary skills tests and pay the required fees for any endorsement(s) you wish to add)

- ☐ **H** Hazardous materials (See **PART 6**)  
☐ **N** Tank Vehicles  
☐ **P** Passengers (**16 or more passengers, including driver**)  
☐ **S** School Bus  
☐ **T** Double and triple trailer combinations  
☐ **X** Combination of **N** and **H** (See **PART 6**)

#### **PART 6 United States Transportation Security Administration Threat Assessment**

Pursuant to O.C.G.A. §40-5-151(i) and 49 CFR §1572, et seq., before issuing, renewing, upgrading, or transferring a commercial driver's license with a hazardous materials endorsement, the Department shall obtain a Transportation Security Administration determination that the individual does not pose a security risk warranting denial of the endorsement.

<b>Are you a U.S. citizen?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO	<b>*Lawful Permanent Resident Alien Registration Number:</b>
<b>If "NO" are you a lawful permanent resident?</b> <input type="checkbox"/> YES* <input type="checkbox"/> NO	<input type="checkbox"/> I-551 <input type="checkbox"/> Temporary I-551 stamp on form I-94 <input type="checkbox"/> Temporary I-551 Stamp in foreign passport <input type="checkbox"/> I-327

#### **PART 7 School Bus Certification**

The applicant named herein is regularly employed by this public school system and as such is entitled to a NO FEE application

<b>Name of School System</b>	<b>School System Mailing Address</b>
<b>Typed/Printed Name of Person Authorized to Sign for School System</b>	<b>City, State, Zip Code</b>
<b>Signature of Person Name Above Authorized to Sign for School System</b>	<b>Notary (Seal Required)</b>

#### **PART 8 Self-Certification**

I hold only one valid driver's license. I certify the preceding statements and information contained in this application are true and correct. I authorize the Georgia Department of Driver Services to verify the accuracy of the information contained herein. I authorize the Georgia Department of Driver Services to release my driving record information to the Commercial Driver's License Information System (CDLIS) and whatever agency CDLIS deems necessary by federal requirements. I understand that it is a crime to fraudulently apply for a driver's license. I am criminally liable for false or misleading statements on this application.

<b>Applicant's Signature</b>	<b>Notary (Seal Required)</b>
<b>Applicant's Telephone Number</b> ( )	<b>Notary Signature</b>